PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

10647348

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			>6.				Γ	RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			minus 20=		* J			X\$ 9=		OR	X\$18=	144
INDEPENDENT CLAIMS			/ minus 3 =		* >		Ī	X42=		OR	X84=	1.68
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2			L	TOTAL		OR	TOTAL	1062	
CLAIMS AS AMENDED - PART II								•		•	OTHER	THAN
		(Column 1)	(Column 2			(Column 3)		SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	r 01 444	=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF MU	JUTIPLE DEF	'ENDEN	CLAIM			+140=		OR	+280=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colui	mn 21	(Column 3)	Α	.DDIT. FEE		J - · ·	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╵┞	+140=			+280=	
								TOTAL		OR	TOTAL	
								DDIT. FEE		OR	ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	ı			ı		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	 	X42=			X84=	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEPENDENT		T CLAIM		╽┝	/ / / -		OR		
	If the enter to act	mn 4 in less than 1	no onto in onto		- "O" !	slumm 2		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
***		imber Previously P nber Previously Pa					er form	nd in the and	oropriate ho	x in co		